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CMS Seeks Provider Input on Satisfaction with Medicare Fee for Service Contractor Services

Note: This article was revised to contain Web addresses that conform to the new CMS web site and to show they are now MLN Matters articles. All other information remains the same.

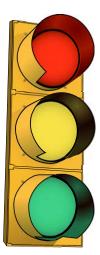
Provider Types Affected

A sample of 8,200 (or 2 percent of) Medicare providers served by 12 Medicare Fee-for-Service contractors (carriers and fiscal intermediaries), including hospitals, Skilled Nursing Facilities (SNFs), rural health clinics, home health clinics, End-Stage Renal Disease (ESRD) facilities, physicians, non-physicians, Durable Medical Equipment (DME) suppliers, and ambulance service providers

Provider Action Needed

STOP – Impact to You

The Centers for Medicare & Medicaid Services (CMS) would like to provide a channel for you to voice your opinions about the services you receive from your Medicare Fee-for-Service (FFS) contractors (carriers and fiscal intermediaries, including Durable Medical Equipment Regional Carriers (DMERCs) and regional home health intermediaries (RHHIs)). The Medicare Contractor Provider Satisfaction Survey (MCPSS) will be CMS's initial effort to use provider satisfaction as a standard of measurement to evaluate our FFS contractors' performance. CMS values the opinions of the Medicare physician and provider community and understands the important role that FFS contractors play in representing the Medicare program to providers. The MCPSS represents an important opportunity for you to be heard.



CAUTION – What You Need to Know

The first year of the MCPSS is a pilot. CMS has selected 12 FFS contractors to participate in the pilot: 4 Fiscal Intermediaries (FIs): AdminaStar Federal, Noridian Administrative Services L.L.C., Riverbend GBA, and Empire Medicare Services; 4 Carriers: National Heritage Insurance Company (NHIC), Wisconsin Physician Services (WPS), TrailBlazer Health, and Empire Medicare Services; 2 Durable Medical Equipment Regional Carriers (DMERCs): Health Now New York and AdminaStar Federal; and 2 Regional Home Health Intermediaries (RHHIs): Palmetto GBA and Anthem Health Plans of Maine. A random sample of 8,200 providers (approximately 2% of providers) served by these twelve FFS contractors have been selected to participate in the pilot. If you have been selected, you should have received a notification packet with background information about the pilot, as well as an instruction sheet with information on how to access and complete the survey instrument via a secure Internet web site. The letter also includes a phone number that you can call to request a paper copy of the survey instrument to submit your responses by mail or fax, if you prefer to do so.

GO – What You Need to Do

Be alert for a notification packet in the mail. If you are selected and receive the notification packet, please take the time to complete and submit your survey responses as soon as possible. The data collection period for the pilot will continue through the end of March.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

Background

On January 17, 2005, CMS launched a pilot of the MCPSS. The survey will give providers the opportunity to rate their Medicare contractor on seven administrative functions: provider communications, provider inquiries, claims processing, appeals, provider enrollment, medical review, and provider reimbursement. The survey contains a total of 76 questions and takes approximately 22 minutes to complete. Sampled providers will be able to access the survey on a secure Internet web site or may request a paper copy of the survey and submit via mail or fax. Data collection for the pilot will continue through March 2005.

CMS will use the results of the pilot to evaluate and refine the survey instrument, data collection procedures, analysis, and reporting of results for the national survey implementation. The results of the pilot will not be used to evaluate the Medicare contractors' performance.

In the future, CMS plans to use the MCPSS to support and assist contractors in using provider feedback to identify and implement "best practices" and quality or process improvement initiatives.

CMS has awarded a contract to Westat, a survey research firm, to administer the MCPSS.

Additional Information

For questions or additional information about the MCPSS, please visit http://www.cms.hhs.gov/MCPSS/ on the CMS web site.